INCORPORATED VILLAGE OF KENSINGTON

NASSAU COUNTY, NEW YORK

APPLICATION FOR BUILDING PERMIT

PERMIT #	

2 Nassau Drive, Great Neck, NY 11021 (516) 482-4409 Fax (516) 482-2866 www.villageofkensingtonny.gov

This application form shall be submitted in duplicate, both copies bearing original signatures where required, along with a nonrefundable \$250.00 initial Building Permit application fee check made payable to the Village of Kensington. This fee payment shall be deducted from and applied against the total Building permit fee as calculated below. When the Building Inspector's approval stamp and signature are affixed below and returned to the applicant with the pink Building Permit placard, both documents shall constitute a valid Building Permit. The original Building Permit and the stamped, approved plans MUST be retained on the construction site and be available for the Building Inspector's review at all times during the construction process. The application process and Building Permit are subject to the conditions printed on the reverse side (or second page) of this form. The owner and the applicant are advised to read and abide by the conditions on the reverse carefully.

All permits issued by this Building Department are strictly subject to the Zoning Codes of the Incorporated Village of Kensington and all New York State Building, Maintenance, and Fire Codes applicable on the date of the application. NO ERROR OR OMISSION IN THE ISSUANCE OF THIS OR ANY PERMIT GRANTED BY THE VILLAGE OF KENSINGTON SHALL LEGITIMIZE OR LEGALIZE ANY CONSTRUCTION OR USE OTHERWISE PROHIBITED BY LAW.

Please check all of the following that apply to this application:

ADDITION [] INTERIOR RENOVATION [] EXTERIOR RENOVATION [] WINDOW REPLACEMENT [] ACCESSORY USE OR STRUCTURE [] NEW RESIDENCE [] OTHER [] Specify: S/B/L: 2/__/___ Date Rec'd: ____ Fee Paid: \$ ____ Fee Type: ____ Check #: ____ VILLAGE USE ONLY Date Rec'd: ___ Fee Paid: \$ ___ Fee Type: ____ Check #: ____ Property Owner's Information:

| Last Name: ______ | First Name: ______ | Corp. Name: ______ | | Street Address: ______ | City: _____ | State: _____ | Zip: _____ | | Tel. No: ______ | Fax No: ______ | Email: ______ | | Address of Permit Activity: ______ | City: _____ | State: _____ | Zip: _____ | | Description of Permit Activity: ______ | State: _____ | Zip: ______ | | Building Permit Fee Calculation: (*assessed once per application)

Check and calculate all that apply to this application: [] New Res. /> 40% Add./Renov.: ______ SF @ \$3.75 / SF = \$_____ + \$1,000.00 = \$_____ [] Addition < 40% Gross Area: _____ SF @ \$3.30 / SF = \$_____ + *\$ 500.00 = \$____ [] Kitchen / Bathroom Renovation: _____ SF @ \$3.00 / SF = \$____ + *\$ 500.00 = \$_____ []

DO NOT WRITE BELOW THIS LINE - PERMIT IS NOT VALID UNLESS STAMPED HERE

Arcl	nitect/Engineer: Bus	iness/Corporate Name:			
Last:		First:	Middle Initial:	Lic. Number:	
Stree	et Address:		City, State, Zip code:_		
Tele	Number:	Fax Number:	Email:		
Con	tractor: Business/Co	orporate Name:			
Last:		First:	Middle Initial:	Lic. Number:	
			<u> </u>		
Tele	Number:	Fax Number:	Email:		
<u>Plun</u>	nber: Business/Corp	orate Name:			
				Lic. Number:	
Tele	Number:	Fax Number:	Email:		
		rporate Name:			
Last:		First:	Middle Initial:	Lic. Number:	
Stree	et Address:		City, State, Zip code:_		
Tele	Number:	Fax Number:	Email:		
3]4]5]6]	Completion is issue Building Inspector continue until such The owner or his permits prior to exp Permit shall expire permit has been rec	d. These plans will be made availal shall be given a minimum forty-conspection has been completed and representative shall be responsible biration of same. three (3) months from the date of is	ble to the Building Inspector upon eight (48) hours notice to make approved. to arrange for all required inspector upon eight (48) hours notice to make approved. sto arrange for all required inspector upon eight (48) hours notice to make approved.	required inspections and no work shall ections and (if necessary) to renew all ogress. No work is to be started until rk prior to the receipt and posting of the	
7]	=	nitted between the hours of 8 AM an	-		
8]		is the responsibility of the owner/applicant to submit plans and applications to the Building Department in compliance with all ederal, State and local laws.			
Nam	e of Property Owne	er (please print):			
depo that l	ses and says that he/s ne/she is the owner in	fee of all certain lots, parcels of	f land known as (address of peri	in the State of, mit activity):, Block, Lot(s)	
and u accor name	understand items one rdance with the appropriates	lated, lying and being within the (1) through eight (8) as above stoved application and accompanying	incorporated area of the Village tated, that the work to be done using plans of which he/she is total as his/her representative to file to	e of Kensington; that I have read upon the premises shall be done in ally familiar; And that he/she hereby this application on his/her behalf.	
_		day of			
Sign	ature of Notary Public	c:			